

**APPOINTMENT OF CAMPAIGN TREASURER
AND DESIGNATION OF CAMPAIGN
DEPOSITORY FOR CANDIDATES**

(Section 106.021(1), F.S.)

(PLEASE PRINT OR TYPE)

04-06-12P12:59 RCVD

NOTE: This form must be on file with the qualifying officer before opening the campaign account.

OFFICE USE ONLY

1. CHECK APPROPRIATE BOX(ES):

☒ Initial Filing of Form Re-filing to Change: ☐ Treasurer/Deputy ☐ Depository ☐ Office ☐ Party

2. Name of Candidate (in this order: First, Middle, Last)

CARYL M. HATTAN

3. Address (include post office box or street, city, state, zip code)

7790 N.W. 31 ST.
DAVIE, FL. 33024-2203

4. Telephone

(954) 432-8114

5. E-mail address

CMHHME@aol.com

6. Office sought (include district, circuit, group number)

TOWN of DAVIE
Councilmember District 2

7. If a candidate for a nonpartisan office, check if applicable:

☐ My intent is to run as a Write-In candidate.

8. If a candidate for a partisan office, check block and fill in name of party as applicable: My intent is to run as a

☐ Write-In ☒ No Party Affiliation ☐ _____ Party candidate.

9. I have appointed the following person to act as my

☒ Campaign Treasurer ☐ Deputy Treasurer

10. Name of Treasurer or Deputy Treasurer

CARYL M. HATTAN

11. Mailing Address

7790 N.W. 31 ST.

12. Telephone

(954) 432-8114

13. City

DAVIE

14. County

Broward

15. State

FL.

16. Zip Code

33024-2203

17. E-mail address

CMHHME@aol.com

18. I have designated the following bank as my

☒ Primary Depository ☐ Secondary Depository

19. Name of Bank

BRIGHT STAR CREDIT UNION

20. Address

2400 Davie Road.

21. City

DAVIE

22. County

Broward

23. State

FL.

24. Zip Code

33317

UNDER PENALTIES OF PERJURY, I DECLARE THAT I HAVE READ THE FOREGOING FORM FOR APPOINTMENT OF CAMPAIGN TREASURER AND DESIGNATION OF CAMPAIGN DEPOSITORY AND THAT THE FACTS STATED IN IT ARE TRUE.

25. Date

4-6-12

26. Signature of Candidate

X Caryl M. Hattan

27. Treasurer's Acceptance of Appointment (fill in the blanks and check the appropriate block)

I, CARYL M. HATTAN, do hereby accept the appointment
(Please Print or Type Name)

designated above as:

☒ Campaign Treasurer ☐ Deputy Treasurer.

4-6-12

Date

X Caryl M. Hattan

Signature of Campaign Treasurer or Deputy Treasurer

STATEMENT OF CANDIDATE

(Section 106.023, F.S.)

(Please print or type)

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I, CARYL M. HATTAN,
candidate for the office of Councilmember Town of Davie;
District 2
have been provided access to read and understand the requirements of
Chapter 106, Florida Statutes.

X Caryl M. Hattan
Signature of Candidate

4-6-12
Date

Each candidate must file a statement with the qualifying officer within 10 days after the Appointment of Campaign Treasurer and Designation of Campaign Depository is filed. Willful failure to file this form is a first degree misdemeanor and a civil violation of the Campaign Financing Act which may result in a fine of up to \$1,000, (ss. 106.19(1)(c), 106.265(1), Florida Statutes).